

Exploring the concept of resilience

The term “resilience” is gaining increasing exposure in the academic and policy discourse in New Zealand as government departments and Crown agencies employ the term to describe or explain Māori communities, groups and individuals. In 2009 Whakauae Research for Māori Health and Development embarked on a two year research project to explore the concept of resilience; its meaning for Māori whānau; its application in Māori primary health care programmes; and its relationship to the indigenous concept “whānau ora”.

The project is a unique collaboration between an iwi-based research centre, Whakauae Research; a Māori primary health care provider, Te Oranganui Iwi Health Authority (TOIHA) PHO; and, the Health Services Research Centre at Victoria University of Wellington. The project, *Facilitating whānau resilience through Māori primary health intervention*, is funded by the HRC’s Partnership Programme, along with Ngā Pae o te Māramatanga, the Accident Compensation Corporation and the Families Commission.

The research team are testing the hypothesis that primary health approaches in Māori settings have the ability to assist whānau to increase resilience by supporting them to find resources that sustain their wellbeing and do so in culturally meaningful ways. Early results are already providing interesting data. Key informants were asked to consider whether TOIHA, as a health care provider, works in a way that is consistent with assisting individuals and whānau to access resources in a culturally appropriate way.

In response, informants described a number of functions TOIHA staff perform which assist whānau to access the health resources they need and to do so in a timely and importantly, culturally appropriate manner. Practitioners acted as navigators (assisting people through the various services that they needed); as advocates (advocating for consumers with other health care and social service providers outside TOIHA); as educators (both informing consumers of the role of various services and educating them about medications, procedures, and how to make lifestyle changes to improve health outcomes); as brokers (accessing wider community-based assistance and services); and in general as support people.

Also identified is that among the service’s consumers, there are a group of individuals and whānau who they would describe as being more “resilient” than others. One informant noted these “more resilient” whānau have greater access to “natural resources” including family (particularly extended family); friends; links to their marae and other institutions of culture, including places of significance. These whānau and individuals are often more educated (even if it is simply that they are more informed than earlier generations regarding the harm caused by drugs, tobacco and alcohol); and have a greater knowledge of their rights as consumers of health care services.

It was also noted that primary health care providers such as TOIHA must be ready to act at all times so they are able to work with an individual or whānau as soon as they



Dr Heather Gifford

Key words:

- Resilience, Māori, whānau, primary health care

Aims of this research:

- The research team are testing the hypothesis that primary health approaches in Māori settings have the ability to assist whānau to increase resilience by supporting them to find resources that sustain their wellbeing and do so in culturally meaningful ways

signal their readiness. This is given the government’s stated desire, in its Whānau Ora policy platform, for more effective and integrated service delivery. Our early results indicate that the window of opportunity to assist whānau once they have decided to pursue a healthier life is very small and if providers are slow to engage with a whānau or do not recognise signs of readiness to change, they may end up “turning the whānau off” or completely losing the opportunity to work with them.

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